Case 04-41509 Doc 1 Filed 11/09/04 Entered 11/09/04 11:24:35 Desc Petition Page 1 of 37 (Official Form 1) (12/02) FORM B1 United States Bankruptcy Court Voluntary Petition Northern District of Illinois Name of Joint Debtor (Spouse) (Last, First, Middle): Name of Debtor (if individual, enter Last, First, Middle): Anderson, Tamika M. Burney, Dwain O. All Other Names used by the Debtor in the last 6 years All Other Names used by the Joint Debtor in the last 6 years (include married, maiden, and trade names): (include married, maiden, and trade names): Chapter 13W Blan No. (if more than one, state all): Soc. Sec./Tax I.D. No. (if more than one, state all): xxx-xx-7230 xxx-xx-2206 Street Address of Debtor (No. & Street, City, State & Zip Code): Street Address of Joint Debtor (No. & Street, City. State & Zip Code): 1945 Wilson Ave. 1945 Wilson Ave. Calumet City, IL 60409 Calumet City, IL 60409 County of Residence or of the County of Residence or of the Cook Principal Place of Business: Principal Place of Business: Mailing Address of Debtor (if different from street address): Mailing Address of Joint Debtor (if different from street address): Location of Principal Assets of Business Debtor (if different from street address above): Information Regarding the Debtor (Check the Applicable Boxes) Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Chapter or Section of Bankruptcy Code Under Which Type of Debtor (Check all boxes that apply) the Petition is Filed (Check one box) □ Railroad Individual(s) ☐ Chapter 7 Chapter 11 Chapter 13 ☐ Stockbroker Corr oration ☐ Commodity Broker ☐ Chapter 9 ☐ Chapter 12 Partnership ☐ Sec. 304 -C ase ancillary to foreign proceeding Clearing Bank Other Filing Fee (Check one box) Nature of Debts (Check one box) Full Filing Fee attached Consumer/Non-Business ☐ Business ☐ Filing Fee to be paid in installments (Applicable to individuals only.) Chapter 11 Small Business (Check all boxes that apply) Must attach signed application for the court's consideration certifying that the debtor is unable Rule 10000 U.S. Bankruptcy Court ☐ Debtor is a small business as defined in 11 U.S.C. § 101 Northern District Of Illinois ☐ Debtor is and elects to be considered a small business under 11 U.S.C. § 1121(e) (Optional) Debtor estimates that funds will be available for distribution to unsecured creditor.

Debtor estimates that after any world. Statistica /Administrative Information (Estimates only) BURNEY Fee : 194 Debtor: DWAIN ☐ Debtor estimates that, after any exempt property is excluded and administrative ex 3110331 will be no funds available for distribution to unsecured creditors. @ 02:30PM Estimated Number of Creditors 1-15 16-49 50-99 100-199 200-999 12/09/2004 12/22/2004 B 10:30AM MARILYN MARSHALL Estimated Assets \$50,000,00 \$1,000.001 to \$10,000,001 to Trustee: \$500.001 to \$50,001 to \$100,001 to \$0.10 \$100 millic \$10 million \$50 million \$50 000 \$100,000 \$500,000 \$1 million

\$50,000,001

\$100 million

\$10,000,001 to

\$50 million

\$1,000,001 to

\$10 million

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\$500,001 to

\$1 million

\$100,001 to

\$500,000

\$50,001 to

\$100,000

Estimated Debts

\$0 to

\$50,000

	Entered 11/09/04 11:24:35	
Voluntary Petition Page	2√onfe3₀7 Debtor(s):	FORM B1, Page 2
(This page must be completed and filed in every case)	Burney, Dwain O.	
The page man be compresed and free in every come,	Anderson, Tamika M.	
Prior Bankruptcy Case Filed Within Last 6	Years (If more than one, attach addit	ional sheet)
Location	Case Number:	Date Filed:
Where Filed: Northern District of Indiana	99-61422	4/27/99
Pending Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more than	one attach additional cheet)
	Case Number:	Date Filed:
Name of Debtor: - None -	Case Number:	Date Fried.
	Datationalia	Ludas
District:	Relationship:	Judge:
Sign	atures	
Signature(s) of Debtor(s) (Individual/Joint)	Ex	hibit A
I declare under penalty of perjury that the information provided in this		ed to file periodic reports (e.g., forms
petition is true and correct.		d Exchange Commission pursuant to
[If petitioner is an individual whose debts are primarily consumer debts	Section 13 or 15(d) of the Securities requesting relief under chapter 11)	Exchange Act of 1934 and is
and has chosen to file under chapter 7] I am aware that I may proceed under the pter 7, 11, 12, or 13 of title 11, United States Code, understand	Exhibit A is attached and made	e a part of this petition
the relief available under each such chapter, and choose to proceed under		
chapter 7		h ibit B `debtor is an individual
I request relief in accordance with the chapter of title 11, United States		marily consumer debts)
Code, specified in this petition.	I, the attorney for the petitioner nam	ed in the foregoing petition, declare
() () mark	that I have informed the petitioner th	
Signature of Debtor Dwain O. Burney	chapter 7, 11, 12, or 13 of title 11, U	nited States Code, and have
	explained the relief available under	each such chapter.
x tamba m. anderson	A	11/2/09
Signature of Joint Debtor Tamika M. Anderson	Signature of Attorney for Debto	
	- Andrew W. Partridge #6270	aibit C
Telephone Number (If not represented by attorney)	Does the debtor own or have posses	
10 - 12 -00	a threat of imminent and identifiable	
Date	safety?	
	☐ Yes, and Exhibit C is attached	and made a part of this petition.
Signature of Attorney	■ No	
X May C	Signature of Non-Att	orney Petition Preparer
Signature of Attorney for Debtor(s) Truns W. Thompson	I certify that I am a bankruptcy petit	
Andrew W. Partridge #6276736 6 279923	§ 110, that I prepared this document	for compensation, and that I have
Printed Name of Attorney for Debtor(s)	provided the debtor with a copy of t	nis document.
Macey Chern & Diab		
Firm Name	Printed Name of Bankruptcy Pe	tition Preparer
444 N. Wells, Ste. 301		
Chicago, IL 60610	Social Security Number	
Address		
(312) 467-0004 Fax: (312) 467-1832		
Telephone Number	Address	
11/5/04		
Date		bers of all other individuals who
	prepared or assisted in preparing	g this document:
Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this		
petition is true and correct, and that I have been authorized to file this		
petition on behalf of the debtor.		And the second second second
The debtor requests relief in accordance with the chapter of title 11,	It more than one person prepare	d this document, attach additional riate official form for each person.
United States Code, specified in this petition.		
X	X Signature of Bankruptcy Petitio.	
X	Signature of Bankruptcy Petition	n Preparer
Printed Name of Authorized Individual	Date	
Thinks while of realistice marriada.	A book point and a still a manage and	failure to comply with the
Title of Authorized Individual	A bankruptcy petition preparer's provisions of title 11 and the Fe	deral Rules of Bankruptev
The of Authorized Individual	Procedure may result in fines or	imprisonment or both. 11
	U.S.C. § 110; 18 U.S.C. § 156.	•
Date		

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United States Bankruptcy Court Northern District of Illinois

In re	Dwain O. Burney, Tamika M. Anderson		Case No.	
		Debtors	Chapter	13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A. B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts from Schedules D, E, and F to determine the total amount of the debtor's liabilities.

			AM	OUNTS SCHEDULED	
NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		· · · · · · · · · · · · · · · · · · ·
B - Personal Property	Yes	3	9,572.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		0.00	
E - Creditors Holding Unsecured Priority Claims	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	14		38,045.97	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			2.190 00
J - Current Expenditures of Individual Debtor(s)	Yes	1			2,040.00
Total Number of Sheets of ALL So	chedules	25			
	To	tal Assets	9,572.00		
		_	Total Liabilities	38,045.97	- 11

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In re	Dwain O. Burney, Tamika M. Anderson			Case No.	
_		Debtors DULE A. REAL PF	 ROPERTY		
otenant, one debtor abeled "L Do leases. If a laims to	community property, or in which the debtor has sown benefit. If the debtor is married, state when Iusband, Wife, Joint, or Community." If the debtor not include interests in executory contracts and until entity claims to have a lien or hold a secured hold a secured interest in the property, write "Note that the debtor is an individual or if a joint petition is fast Exempt.	a life estate. Include any pro- ther husband, wife, or both or or holds no interest in real pro- nexpired leases on this schedu- interest in any property, state- one" in the column labeled ".	perty in which the two the property perty, write "Noule. List them in the amount of Amount of Secu	the debtor holds rights and p by placing an "H." "W," "J," ne" under "Description and I Schedule G - Executory Con the secured claim. (See Sch tred Claim."	owers exercisable for or "C" in the column location of Property." atracts and Unexpired edule D.) If no entity
	Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
	None				
			Sub-Total	> 0.00	(Total of this page)

(Report also on Summary of Schedules)

Total >

0.00

⁰___ continuation sheets attached to the Schedule of Real Property

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In re	Dwain O. Burney,	Case No.
	Tamika M. Anderson	

Debtors

SCHEDULE B. PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property"

	Type of Property	N O N Description and Location E	n of Property	Husband, Wife, Joint, or Community	XCur rent Market Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	X		-	
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	First Savings Bank of Hegewisch		-	22.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, including audio, video, and computer equipment.	Miscellaneous used household goods	:	-	800.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Miscellaneous books, tapes, CD's etc	,	-	100 00
6.	Wearing apparel.	Personal Used Clothing		-	400.00
7.	Furs and jewelry.	Miscellaneous costume jewelry		-	150.00
8.	Firear ns and sports, photographic, and other hobby equipment.	Х			
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	x			
			·	Sub-Tota this page)	1,472.00

2 continuation sheets attached to the Schedule of Personal Property

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In re	Dwain O. Burney, Tamika M. Anderson			Case No.	
		SCHEE	Debtors Debtors OULE B. PERSONAL PROPER (Continuation Sheet)	RTY	
	Type of Property	N O N E	Description and Location of Property	Husband. Wife, Joint, or Community	Current Market Value of Debtor's Interest in Propest without Deducting any Secured Claim or Exemption
	nnuities. Itemize and name each	×			
ot	terests in IRA, ERISA, Keogh, or ther pension or profit sharing ans. Itemize.	X			
ar	tock and interests in incorporated and unincorporated businesses.	X			
	terests in partnerships or joint entures. Itemize.	Х			
an	overnment and corporate bonds and other negotiable and onnegotiable instruments.	X			
5. A	ccounts receivable.	X			
pr de	limony, maintenance, support, and coperty settlements to which the ebtor is or may be entitled. Give articulars.	X			
in	ther liquidated debts owing debtor cluding tax refunds. Give articulars.	X			
es ex de	quitable or future interests, life tates, and rights or powers terbisable for the benefit of the ebtor other than those listed in chedule of Real Property.	X			
in! de	ontingent and noncontingent terests in estate of a decedent, eath benefit plan, life insurance blicy, or trust.	X			
			(Sub-Tota Total of this page)	0.00

Sheet 1 of 2 continuation sheets attached to the Schedule of Personal Property

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In r	re Dwain O. Burney, Tamika M. Anderson			Case No.	
	-	SCHE	Debtors DULE B. PERSONAL PROPER (Continuation Sheet)	TY	
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
c ta d	Other contingent and unliquidated claims of every nature, including ax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
iı	Patents, copyrights, and other ntellectual property. Give particulars.	Х			
g	cicenses, franchises, and other general intangibles. Give particulars.	Х			
	automobiles, trucks, trailers, and	1997 E	Buick Skylark. 75,000 miles.	-	5,315.00
O	ther vehicles and accessories.	1993 F	Pontiac Gran Am. 110,000 miles.	J	2,785.00
24. B	Boats, motors, and accessories.	X			
25. A	ircraft and accessories.	X			
	Office equipment, furnishings, and upplies.	X			
	fachinery, fixtures, equipment, and uppl es used in business.	Х			
28. In	eventory.	X			
29. Ai	nimals.	X			
	rops - growing or harvested. Give articulars.	X			
	arming equipment and oplements.	X			
32. Fa	arm supplies, chemicals, and feed.	Х			
	ther personal property of any kind of already listed.	X			
				Sub-Total	> 8,100.00
L	2 of 2 continuation sheets	1 1	(To	otal of this page) Total	> 9,572.00

Sheet 2 of 2 continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules:

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l	n	re
I	n	re

Dwain O. Burney, Tamika M. Anderson

Case No.	

Debtors

SCHEDULE C. PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:

[Check one box]

☐ 11 U.S.C. §522(b)(1): ☐ 11 U.S.C. §522(b)(2): Exemptions provided in 11 U.S.C. §522(d). Note: These exemptions are available only in certain states.

Exemptions available under applicable nonbankruptcy federal laws, state or local law where the debtor's domicile has been located for the 180 days immediately preceding the filing of the petition, or for a longer portion of the 180-day period than in any other place, and the debtor's interest as a tenant by the entirety or joint tenant to the extent the interest is exempt from process under applicable nonbankruptcy law.

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Market Value of Property Without Deducting Exemption
Checking, Savings, or Other Financial Accounts, Certi First Savings Bank of Hegewisch	ficates of Deposit 735 ILCS 5/12-1001(b)	22.00	22.00
Household Goods and Furnishings Miscellaneous used household goods	735 ILCS 5/12-1001(b)	800.00	800.00
Books, Pictures and Other Art Objects; Collectibles Miscellaneous books, tapes, CD's etc.	735 ILCS 5/12-1001(b)	100.00	100.00
Wearing Apparel Personal Used Clothing	735 ILCS 5/12-1001(a)	400.00	400.00
<u>Furs and Jewelry</u> <u>Miscellaneous costume jewelry</u>	735 ILCS 5/12-1001(b)	150.00	150 00
Automobiles, Trucks, Trailers, and Other Vehicles 1997 Buick Skylark. 75,000 miles.	735 ILCS 5/12-1001(c)	2,400.00	5.315 .00
1993 Pontiac Gran Am. 110,000 miles.	735 ILCS 5/12-1001(b)	2,785.00	2,785.00

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In re	Dwain O. Burney,	Case No.
	Tamika M. Anderson	

Debtors

SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and account number, if any, of all entities holding claims secured by property of the debtor as of the date of filing of the petition. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests. List creditors in alphabetical order to the extent practicable. If all secured creditors will not fit on this page, use the continuat on sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H -C odebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J." or "C" in the column labeled "Husband. Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled

"Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Repor. the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Check this box if debtor has no credit			ig secured claims to report on this Schedule D.			, ,		
CREDITOR'S NAME AND MAILING ADDRESS. INCLUDING ZIP CODE	CODEBTOR	C H H	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED. NATURE OF LIEN, AND DESCRIPTION AND MARKET VALUE OF PROPERTY SUBJECT TO LIEN	COXTLZGEZT	08-1-00-04-mo	ローの中して田口	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION IF ANY
Account No.				Т	E		· · · · · · · · · · · · · · · · · · ·	
			Value \$		D			
Account No.	1			1	1	\dashv		
Account No.			Value \$					
Account No.			Value \$					
ACCOUNT NO.			Value \$					
0 continuation sheets attached			Si	ubto	tal	T		
- continuation sheets attached			(Total of th	is pa	ige)		
			(Report on Summary of Sch	To nedu)	0.00	

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In re	Dwain O. Burney,	Case No.
	Tamika M. Anderson	

SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name and mailing address, including zip code, and account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of this petition.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "II," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Repeat this total also on the Summary of Schedules.

■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
 TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)
 □ Extensions of credit in an involuntary case
 Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(2).

☐ Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$4,650* per person earned within 90 days immediately preceding the filing of the original petition, or the cessat on of business, which ever occurred first, to the extent provided in 11 U.S.C. § 507 (a)(3).

☐ Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessat on of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$4,650* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(5).

☐ Deposits by individuals

Claims of individuals up to \$2,100* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(6).

☐ Alimony, Maintenance, or Support

Claims of a spouse, former spouse, or child of the debtor for alimony, maintenance, or support, to the extent provided in 11 U.S.C. § 507(a)(7).

☐ Taxes and Certain Other Debts Owed to Governmental Units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C § 507(a)(8).

☐ Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

*Amounts are subject to adjustment on April 1, 2004, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

0 continuation sheets attached

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In re	Dwain O. Burney, Tamika M. Anderson	Case No.	 -
			

Debtors

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and account number, if any, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. Do not include claims listed in Schedules D and E. If all creditors will not fin on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

American Medical Collection Agency	7		Notice only Collection for Quest Diagnostics, Inc.					
Account No. xxxxxx9999			01 Notice only					
Account No. xxxxxx9999	-	Ц	84					0.00
Bloomington, IL 61702								
PO Box 3427				ļ			ļ	
404 Brock Dr.		الا	Conection for Cingular	}		ľ		
AFNI			Collection for Cingular	1	- 1	1		
			Notice only			ı		
Account No. xxxxxxx5302	_	T	03	 +	+	+	+	
						1	-	0.00
				İ				
Indianapol s, IN 46219	ı			1		ł	ı	
P.O. Box 19857		J				1	- [
Account Management Service		١.	Collection for St. Margaret Mercy Health C	enter		T	\neg	
Account Management Service		1	Collection for St. Margaret Margaret L		_	Ď	╝	
71000an 110. AAA-AA-1 200			Notice only		Ŧ	E		
Account No. xxx-xx-7230		+	03		N	D A	۲ 	
	O R		IS SUBJECT TO SETOFF, SO STAT	ΓE.	G	1	U T E D	AMOUNT OF CLAIM
ADDRESS INCLUDING ZIP CODE	i T	J	CONSIDERATION FOR CLAIM IF C	AIM	N	LIQU	Ų,	AMOUNT OF CLAIN
CREDITOR'S NAME AND MAILING	E	H	I DATE CLAIM WAS INCURRED AT	ND	Ň T	Ļ.	S	
	CODEB	H	sband, Wife, Joint, or Community		001	U N	D L	

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In re	Dwain O. Burney, Tamika M. Anderson	Case No.
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SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

	CO	Н	usband, Wife, Joint, or Community	(U	D.	· · · · · · · · · · · · · · · · · · ·
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	DEBTOR	W J		0 N T 1 N G E		DΙ	I SPUTED	AMOUNT OF CLAIN
Account No. xxxx6176			02	۲ ۲	1	A T E		
AMO Recoveries-Collections UNLTD PO Box 947 Waukesha, WI 53187-0947		J	Notice only Collection for Primary Healthcare			D		
Account No. xxxx9103	\bot		03					0.00
AMO Recc veries-Collections UNLTD PO Box 947 Waukesha, WI 53187-0947		J	Notice only Collection for Imh Laboratory Physicians					
A conversal - 2000	_							0.00
Account Nc. xxx-xx-7230 Anthem PO Box 27401 Richmond, VA 23279		J	03 Notice only Collection for St. Margaret Mercy North Campus					
Account No. xxx-xx-7230	4		02					0.00
Asset Acceptance Corp P.O. Box 2036 Warren, MI 48090-2036			Notice only Collection for Providian					
Account No. xMxxx9228	╉┼	+	03				-	0.00
Asset Acceptance Corp P.O. Box 2036 Warren, MI 48090-2036			Judgement					:
								1,069.00
Sheet no of _13 sheets attached to Schedule of Creditors Ho ding Unsecured Nonpriority Claims			S (Total of th	ubto				1,069.00

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In re	Dwain O. Burney, Tamika M. Anderson	Case No.

	č	Н	isband, Wife, Joint, or Community	C	U	Ď	
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBTOR	C 1 M H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	O Z T _ Z G E Z	10	- SP J F W D	AMOUNT OF CLAIM
Account No. xxx-xx-7230		T	00	⊢ N	Α ĭ		
AT&T PO Box 8:212 Aurora, IL 60572-8212		J	Utility bill		D		
Account No. xxx-xx-7230	+	-	01	\downarrow			143.36
Bally Total Fitness PO Box 1070 Norwalk, CA 90651-1070		J	Health club				
							2,630.00
Account No. xxxxxxxxx4003 Bally Total Fitness 12440 Imperial Hwy Ste. 300 Norwalk, CA 90650			02 Health club				
Account Nc. xxx-xx-7230			99	H	-	+	2,434.71
Box Office Video 2233 45th St. Highland, IN 46322			Video				00.00
Account No. 591	╍╉╌┼	+	01	H	+	\downarrow	99.96
Caleel, Olden, & Associates 2 Natoma Dr. Oak Brook, IL 60523		J	Account				120.00
Sheet no. 2 of 13 sheets attached to Schedule o	1 1			ubto	tal	+	
Creditors Helding Unsecured Nonpriority Claims			(Total of t)	5,428.03

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	O. Burney, a M. Anderson	Case No
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SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

Husband, Wife, Joint, or Community CODEBTOR D-89UFED COXT_XGWXT DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM W CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE J AMOUNT OF CLAIM IS SUBJECT TO SETOFF, SO STATE. С Account No. xxxxx7001 98 Collection CB USA Irc. PO Box 8000 Hammond IN 46325 300.00 Account Nc. xxxxxxxxxxx7764 00 Utility bill Cellular One- Chicago P.O. Box 5598 Chicago, IL 60680-5598 412.14 Account No. xx6240 00 Returned check Check Protection Systems P. O. Box 1638 J LaPorte, IN 46352-1638 111.00 Account No. xxxxxxxxxx4858 02 Utility bill Cingular Wireless P.O. Box 806055 Chicago, IL 60680-6055 680.15 Account No. xx6643 03 Notice only Collection Company of America Collection for Cingular Wireless PO Box 329 Norwell, MA 02061 0.00 Sheet no. 3 of 13 sheets attached to Schedule of Subtotal Creditors Holding Unsecured Nonpriority Claims 1,503.29 (Total of this page)

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	C	н	usband, Wife, Joint, or Community	Ic	Tii	ΤE	
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	ODEBTOR	A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	COZHLZGUZ	110	SPUTED	
Account No. xxx-xx-7230]	Γ	02	[№]	A T E		
Community Hospital 901 MacArthur Blvd. Munster, IN 46321		J	Medical Services		E D		
Account No. xxxxxxx6639	+-		00				Unknown
Credit Collection Services 2 Wells Ave Newton Center, MA 02459		J	Notice only Collection for Box Office Video				
Account No. xxxxx0378	<u> </u> - - -						0.00
Credit Management Services 9302 N Meridian St Suite 335 Indianapolis, IN 46260			01 Notice only Collection for Mercantile National Bank				
Account No. xxxxx7798			02				0.00
Credit Protection Association PO Box 802068 Dallas, TX 75380		1	Notice only Collection for AT&T				
Account No. FxHG0172							143.00
Daleys Ambulance Service 395 W. Lake St. PO BOX 1408 Elmhurst, IL 60126		. r .	01 Medical service				
				ŀ			188.00
Sheet no. 4 of 13 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			St (Total of the	btot		†	331.00

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In re	Dwain O. Burney,	Case No.
	Tamika M. Anderson	
_	****	

	co	Ηι	sband, Wife, Joint, or Community	C	U	D	
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	D E B T O R	A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONT INGE	U-00-D		AMOUNT OF CLAIM
Account No. xxxx7918		T	00	⊢ ř	A T E D		·
Dependon Collection Serv. PO Box 6074 River Forest, IL 60305		J	Notice only Collection for Sullivan Urgent Aid Centers		D		
Account No. xxxx4534	_	-	03				0.00
Dependen Collection Serv. PO Box 6374 River Forest, IL 60305		J	Collection				
0.000						Ц	154.00
Account No. xxx6708 Dependor: Collections PO Box 6074 River Forest, IL 60305-6074		J	03 Notice only Collection for Ingalls Midwest emergency Associates				0.00
Account No. xxxxxx6385	_		00 Medical Services				0.00
Emergency Medicine, S.C. 900 Jorie 3lvd. Suite 220 Oak Brook, IL 60523		J					
Account No. xxHxxxxxxPL0559	_		03	\perp	Н	-	178.00
Family Care Center of Indiana 919 Main Street Dyer, IN 43311		J	Judgement				
							1,132.68
Sheet no. 5 of 13 sheets attached to Schedule	of	<u>l</u>		Subt	∟ otal	\dashv	
Creditors Holding Unsecured Nonpriority Claims			(Total of			- 1	1,464.68

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Tamika M. Anderson	In re	Dwain O. Burney, Tamika M. Anderson	Case No.
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	CO	Н	sband, Wife, Joint, or Community		C	Ü	D	
CREDITOR'S NAME AND MAILING A DDRESS INCLUDING ZIP CODE	DEBTOR	n M H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLA IS SUBJECT TO SETOFF, SO STATE	IM	OZH-ZGE	DZLLGDLD	ISPUTED	AMOUNT OF CLAIM
Account No. xxxxxx2850	1	1	01	_	N T	DATED		
Family Medical Center Mohamed M. Krad, MD 1849 N. C ine Ave. Griffith, IN 46319		j	Medical service			D		449.00
Account No. 1221	╀	-	03			-	4	140.00
Financial Credit Corp P.O. Box 2040 Warren, M 48090		J	Notice only Collection for Balley's					
Account Nc. xxxx6090	_		03					0.00
Financial Credit LLC PO Box 44425 Baltimore, IMD 21236			Notice only Collection for Bally's					
Account No AppOTECIMILISTA		4						0 00
Account No. Axx0TFCWHS574 First Financial Asset Management PO Box 56:245 Atlanta, GA 30343		-	03 Notice only Collection for Triad Financial Corp.					
Account No. xxx-xx-7230	H	+)2	$-\downarrow$	1	1	+	0.00
GC Services Limited Partnership 6330 Gulfton Houston, TX 77252-2667		- Įi	Notice only Collection for Ameritech					
								0 00
Sheet no. 6 of 13 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			/T	Sul I of this			1	140 00

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In re	Dwain O. Burney, Tamika M. Anderson	Case No.
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	C	Hu	sband, Wife, Joint, or Community	CO	U	D	
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBTOR	C A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONTINGEN	NLLQUIDAT		AMOUNT OF CLAIN
Account No. xxxxxCP4808			00	Ť	Ť E D		
Hammonc City Court 5925 Calumet Ave. Hammonc, IN 46320		J	Judgment - Creditor Uknown, not reported on credit report		D		
							347.00
Account No. xxxxxCP4988 Hammond City Court 5925 Calumet Ave. Hammond, IN 46320		J	00 Judgment - Creditor not known, not listed on credit report				
							255.00
Account No. xxx7084 Harvey Anesthesiologists S.C. 222 East Dundee Rd. Wheeling, IL 60090			01 Medical service				680.00
Account No. xxx-xx-7230	Н	-	03	H	-	\dashv	
Healthcare Receivable Services P.O. Box 6221 Indianapolis, IN 46206			Notice only Collection for St. Margaret Mercy Health Centers				
Account No. Xxxxx2275		4	02			1	0.00
Humana Insurance Company 1100 Employers Blvd. Green Bay, WI 54344			Insurance				
							70.00
Sheet no7 of13 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			S (Total of th	ubto			1,352.00

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In re	Dwain O. Burney, Tamika M. Anderson	Case No.
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SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

	C	Н	sband, Wife, Joint, or Community		Ċ	U	D	
CREDITOR'S NAME AND MAILING A DDRESS INCLUDING ZIP CODE	DEBTOR	c A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	!	COZH-ZGEZ	UNLIGUIDAT	1 8 P U T E D	AMOUNT OF CLAIM
Account No. xxxxxx5723			02		Ť	Ε		
I.C. Systems, Inc. 444 Highway 96 East P.O. Box 64887 Saint Paul, MN 55164		J	Notice only Collection for Caleet Olden			D		0.00
Account No. xxx9522	+		01					0.00
IMH Laboratory Physicians, S.C. P.O. Box 74821 Chicago, IL 60694		j	Medical service					
								118.00
Account No. xxxxxxxx2445 Ingalls Family Care Center 1600 Torrence Calumet C ty, IL 60409		J	02 Medical Services Client has multiple accounts.	-				
Account Nc. 57			01	_	_		\downarrow	5,492.35
Komyatte & Associates PC 9650 Gordon Dr. Highland, IN 46322			Notice					0.00
Account No. xxMxxx9228	┥┤	+	03	\dashv	\dashv	4	+	0.00
McHahan & Sigunick 216 W. Jackson Chicago, IL 60606			Notice					0.00
Sheet no8of _13 sheets attached to Schedule o	 f			 Su	bto	tal	+	
Creditors Holding Unsecured Nonpriority Claims			(Total c)	5,610.35

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In re	Dwain O. Burney,	Case No.
	Tamika M. Anderson	

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

	_	_		-				
	C	Hu	sband, Wife, Joint, or Community	_ 6			P	
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBTOR	C A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NT N O E N T			SPUTED	AMOUNT OF CLAIM
Account No. xxx-xx-7230			00	T		r	ſ	
Mercantile Bank Box 790074 St Louis, MO 63179		J	Account			0		271.84
Account No. xxxxxxx9390	╁		03	-	+	+	+	
Merchant Credit Guide Co. 223 W. Jackson Ste 900 Chicago, IL 60606		J	Notice only Collection for Harvey Anethesiologists					
						1		0.00
Account No. xxxxxxxx0101 Midwest Emergency Associates PO Box 4353		J	02 Medical service					
Dept 4653 Hinsdale, IL 60522-4653								454.00
	_	Ш			1	4	4	154.20
Account No. xxx7455 Mutual Hospital Collections 2525 N. Shadeland Indianapo is, IN 46219		J	01 Notice only Collection for St. Margaret Mercy Healthcare					
	Ļ	Ц				1		0.00
Account No. xxx0463 Mutual Hospital Collections 2525 N. Shadeland Indianapo is, IN 46219			03 Notice only Collection for St. Margaret Mercy					0.00
Sheet no. 9 of 13 sheets attached to Schedule of				Sub	tot	al	1	426.04
Creditors Folding Unsecured Nonpriority Claims			(Total of	this	pa	ge		420.04

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In re	Dwain O. Burney, Tamika M. Anderson	Case No.

·	CO	Ηι	sband, Wife, Joint, or Community		CO	U	٦٥	
CREDITOR'S NAME AND MAILING A DDRESS INCLUDING ZIP CODE	DEBTOR	C A H	DATE CLAIM WAS INCURRED ANI CONSIDERATION FOR CLAIM. IF CLA IS SUBJECT TO SETOFF, SO STATE	JM	NT - ZGE	1	- ⊗ ₽ ⊃ ⊢ ш ∩	AMOUNT OF CLAIM
Account No. xxx-xx-7230	7		03		N T	DATED		
Mutual Hospital Services P.O. Box ² 9828 Indianapolis, IN 46219-0828		J	Notice only Collection for St. Margaret Mercy Healthcare	,		סר		
Account No. xxx9232	-		00					0.00
OSI Collections Services PO Box 959 Brookfield, WI 53008-0959		J	Notice only Collection for Ingalls Memorial Hospital					
7000	_						İ	0.00
Account No. xxx-xx-7230 Pinnacle Management Services, Inc. 514 Marke: Loop, Suite 103 Dundee, IL 60118			03 Notice only Collection for Ingalls Memorial Hospital					
Account No. xxGxx2412			03		1	+	+	0.00
Primary Healthcare Associates, S.C. 4647 West Lincoln Highway Matteson, IL 60443		J	Medical service					
Account No. xxx3999		_	01		$\frac{1}{1}$	+	\downarrow	365.00
Providian P. O. Box 9023 Pleasanton CA 94566		J	Credit card	13				
								1,345.00
Sheet no. 10 of 13 sheets attached to Schedule o Creditors Holding Unsecured Nonpriority Claims	f		(Tot:	Sul al of this				1,710.00

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In re	Dwain O. Burney, Tamika M. Anderson	Case No.
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SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

	Ta							
	S	H	sband, Wife, Joint, or Community		Co	N	D	
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	DEBTOR	W	DATE CLAIM WAS INCURRED AN CONSIDERATION FOR CLAIM. IF CL IS SUBJECT TO SETOFF, SO STAT	AIM	02H_20m2	7-07-0	- SP U T W D	AMOUNT OF CLAIM
Account No. MCDxxxxx69A06			00		₹ T	Ā		<u> </u>
Quest Diagnostics Inc. P.O. Box 64500 Baltimore, MD 21264-4500		J	Medical service			E D		100.10
Account No. xx6708	╀	_	02		Ц			406.10
Radiology maging Dept 77-9413 Chicago, IL 60678		J	Medical service	ļ				
Account No. xxx-xx-7230	╂╌	Н	00		\Box			328.00
Southwest Credit 2629 Dickerson Parkway Carrollton, "X 75007			Notice only Collection for Cellular One Chicago					
Account No. NSWxx6708	╢	4	02		\dashv	4	_	0.00
Southwest Laboratory Physicians Dept 77-9288 Chicago, IL 60678			Medical Services					
Account No. xxx-xx-7230	${\mathbb H}$	-	01		4	\downarrow	_	147.74
St. Margarel Mercy 5454 Hohman Ave. Hammond, IN 46320		- 1	Medical service Client has multiple accounts.					
Sheet no. 11 of 13 sheets attached to Schedule of		L	1		\perp	_	\perp	534 70
Creditors Holding Unsecured Nonpriority Claims			(To	Sub tal of this	btot s pa			1,416.54

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In re	Dwain O. Burney,	Case No
	Tamika M. Anderson	

· · · · · · · · · · · · · · · · · · ·	C	Hu	sband, Wife, Joint, or Community		С	U	D	
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	ODEBTOR	C H W	DATE CLAIM WAS INCURRED A CONSIDERATION FOR CLAIM. IF C IS SUBJECT TO SETOFF, SO STA	LAIM	ONTINGEZ	CD-	- めむ フト ய ロ	AMOUNT OF CLAIM
Account No. xxxxxxxx0279			00		Ť	T = E		
Sullivan Urgent Aid Ctr. PO Box 87844 Carol Stream, IL 60188		J	Medical service					
		_						235.00
Account No. Txxx5723 Thomas E: Jolas PC 202 First St NW Mason City, IA 50401		j	03 Notice only					
								0.00
Account No. xxxxxxxxxxxxxx0001 Triad Financial Co. PO Box 3.299 Huntington Beach, CA 92605		J	02 INvoluntary Repossession				,	10,091.18
Account No. xxxxxxxx9362		\vdash	00			\dashv	\dashv	
United Credit National Bank PO Box 1:229 Sioux Falls, SD 57101-1229		J	Credit Card					652.00
Account No. xxxx0126	+	Н	03			-		
Van Ru Credit 150 S. Sunnyslope Rd. #108 Brookfield, WI 53005		J	Collection for medical services	:				5,658.00
Sheet no12_ of _13_ sheets attached to Schedule of					ubto	otal	_	
Creditors Folding Unsecured Nonpriority Claims			(Total of th	is p	age	e)	16,636.18

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In re	Dwain O. Burney, Tamika M. Anderson	Case No.	
	ramika ivi. Angerson		

	С	ы	chand Wife Joint or Community	T.	T.,	T _C	T
	ŏ	ı	sband, Wife, Joint, or Community	- C 0	N	ļ.	
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	В	C 1 A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COZH-ZGEZH	DZLLQUIDATED	80 U T W D	AMOUNT OF CLAIM
Account No. xxxxxx0386			02	- N	Α Τ		
Z-Tel Communications 601 S. Harbor Island, Suite 220 Tampa, Fl. 33602		J	Utility bill		E D		70.67
Account No.	-	\dashv		<u> </u>			73.67
Account No.							
						ĺ	
					ļ		
Account No.	-+	\dashv		\square	_	4	
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Account Ne.	\dashv	+		H	4	+	
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	İ					ľ	
Account No	+	+		Н	_	1	
		İ					
							į
i							
12 6 40						\perp	
Sheet no13_ of _13_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				ubto			73.67
County Charles Homphority Charles			(Total of th			<u> </u>	
			(Report on Summary of Sel	To nedu			38,045.97

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In re	Dwain O. Burney, Tamika M. Anderson	Case No.
-	SCHEDULE G. EXECUTORY CO	Debtors NTRACTS AND UNEXPIRED LEASES
St		d leases of real or personal property. Include any timeshare interests, agent," etc. State whether debtor is the lessor or lessee of a lease, parties to each lease or contract described.
N	OTE: A party listed on this schedule will not receive notice schedule of creditors.	of the filing of this case unless the party is also scheduled in the appropriate

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest.
State whether lease is for nonresidential real property.
State contract number of any government contract.

⁰ continuation sheets attached to Schedule of Executory Contracts and Unexpired Leases

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ln re	Dwain O. Burney,	Case No.
	Tamika M. Anderson	
-		Debtors
	SCI	HEDULE H. CODEBTORS
debtor report immed	r in the schedules of creditors. Include all guaranto	person or entity, other than a spouse in a joint case, that is also liable on any debts listed by ors and co-signers. In community property states, a married debtor not filing a joint case should e on this schedule. Include all names used by the nondebtor spouse during the six years e.

NAME AND ADDRESS OF CREDITOR

NAME AND ADDRESS OF CODEBTOR

O continuation sheets attached to Schedule of Codebtors

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In re	Dwain O. Burney, Tamika M. Anderson		Case No.
-		Debtors	

SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

NAMES	Debtor's Marital Status:	DEPENDENTS OF DEBTOR AND SPOUSE							
Occupation Store Manager Key Carrier (Management) Name of Employer Family Dollar Payless Shoe Store How long employed 4 months 3 years Address of Employer 3310 183rd St. Hazel Crest, IL 61 E. River Oaks Dr. Calumet City, IL 60409 INCOME: (Estimate of average monthly income) DEBTOR SPOUSE Curren: monthly gross wages, salary, and commissions (pro rate if not paid monthly) \$ 2,600.00 \$ 432.59 Estimated monthly overtime \$ 0.00 \$ 0.00 SUBTOTAL \$ 2,600.00 \$ 432.59 LESS PAYROLL DEDUCTIONS \$ 736.66 \$ 105.93 a. "ayroll taxes and social security \$ 736.66 \$ 105.93 b. Insurance \$ 0.00 \$ 0.00 c. Jnion dues \$ 0.00 \$ 0.00 d. Other (Specify) \$ 0.00 \$ 0.00 SUBTOTAL OF PAYROLL DEDUCTIONS \$ 736.66 \$ 105.93 TOTAL NET MONTHLY TAKE HOME PAY \$ 1.863.34 \$ 326.66 Regular income from operation of business or profession or farm (attach detailed statement) \$ 0.00 \$ 0.00 Income from real property \$ 0.		NAMES Dependent	AG 10	E RELATIO	-				
Occupation Store Manager Key Carrier (Management) Name of Employer Family Dollar Payless Shoe Store How long employed 4 months 3 years Address of Employer 3310 183rd St. Hazel Crest, IL 61 E. River Oaks Dr. Calumet City, IL 60409 INCOME: (Estimate of average monthly income) DEBTOR SPOUSE Curren: monthly gross wages, salary, and commissions (pro rate if not paid monthly) \$ 2,600.00 \$ 432.59 Estimated monthly overtime \$ 0.00 \$ 0.00 SUBTOTAL \$ 2,600.00 \$ 432.59 LESS PAYROLL DEDUCTIONS \$ 736.66 \$ 105.93 a. "ayroll taxes and social security \$ 736.66 \$ 105.93 b. Insurance \$ 0.00 \$ 0.00 c. Jnion dues \$ 0.00 \$ 0.00 d. Other (Specify) \$ 0.00 \$ 0.00 SUBTOTAL OF PAYROLL DEDUCTIONS \$ 736.66 \$ 105.93 TOTAL NET MONTHLY TAKE HOME PAY \$ 1.863.34 \$ 326.66 Regular income from operation of business or profession or farm (attach detailed statement) \$ 0.00 \$ 0.00 Income from real property \$ 0.	EMPLOYMENT:	DEBTOR	1	SPOUS	Ē				
Name of Employer		ore Manager	Key Carrie						
Address of Employer 3310 183rd St. Hazel Crest, IL Calumetr City, IL 60409 Calumetr Ci									
NCOME: (Estimate of average monthly income) DEBTOR SPOUSE	How long employed 4 r	nonths	3 years						
Curren: monthly gross wages, salary, and commissions (pro rate if not paid monthly) 2,600.00 \$ 432.59 Estimated monthly overtime \$ 0.00 \$ 0.00 SUBTOTAL \$ 2,600.00 \$ 432.59 LESS PAYROLL DEDUCTIONS \$ 736.66 \$ 105.93 b. Insurance \$ 0.00 \$ 0.00 c. Jnion dues \$ 0.00 \$ 0.00 d. Other (Specify) \$ 0.00 \$ 0.00 SUBTOTAL OF PAYROLL DEDUCTIONS \$ 736.66 \$ 105.93 TOTAL NET MONTHLY TAKE HOME PAY \$ 1.863.34 \$ 326.66 Regula: income from operation of business or profession or farm (attach detailed statement) \$ 0.00 \$ 0.00 Income from real property \$ 0.00 \$ 0.00 Interest and dividends \$ 0.00 \$ 0.00 Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above \$ 0.00 \$ 0.00 Social security or other government assistance \$ 0.00 \$ 0.00 \$ 0.00 Region or retirement income \$ 0.00 \$ 0.00 \$ 0.00 Pension or retirement income \$ 0.00 \$ 0.00 \$ 0.00 <td>1 2</td> <td></td> <td></td> <td></td> <td>. , .</td> <td></td>	1 2				. , .				
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A. Other (Specify)			·						
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Regular income from operation of business or profession or farm (attach detailed statement) S	TOTAL NET MONTHLY	TAKE HOME PAY	\$	1,863.34	- \$	326.66			
Statement Stat	Regular income from oper	ation of business or profession or farm (attach detailed	<u> </u>						
Interest and dividends		•		0.00	\$	0.00_			
Interest and dividends	Income from real property		\$	0.00	\$	0.00			
or that of dependents listed above \$ 0.00 \$ 0.00 Social security or other government assistance (Specify) \$ 0.00 \$ 0.00 Pension or retirement income \$ 0.00 \$ 0.00 Other monthly income (Specify) \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	Interest and dividends		\$	0.00					
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	(Specify)		ş -		\$				
TELLAT METAL THE THE THE TAKEN	TOTAL MONTHLY INCO	OME	<u> </u>	1,863.34		326 66			
TOTAL MONTHLY INCOME \$\frac{1,863.34}{2,190.00} \\$ \frac{1,863.34}{2,190.00} \\$ (Report also on Summary of Schedules)									

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:

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In re Dwain O. Burney, Tamika M. Anderson			Case No.		<u></u>
•	74.	Debtors	,		
SCHEDULE J. CU	RRENT E	XPENDITURES	OF INDIVIDUAL DE	ЕВТО	PR(S)
Complete this schedule by estimate made bi-weekly, quarterly, semi-annual	ting the averagally, or annua	ge monthly expenses of fly to show monthly rat	the debtor and the debtor's far e.	mily. P	ro rate any payme
☐ Check this box if a joint petition expenditures labeled "Spouse."	is filed and d	lebtor's spouse maintain	s a separate household. Com	plete a	separate schedule
Rent or home mortgage payment (inc				\$	705.00
Are real estate taxes included?	Yes	No <u>X</u>			
Is property insurance included?					
Utilities: Electricity and heating fuel	l	· • • • • • • • • • • • • • • • • • • •	,	\$	225.00
Water and sewer				\$	120.00
			· · · · · · · · · · · · · · · · · · ·		
Home maintenance (repairs and upker	ep)			\$	0.00
Food					
Clothing				\$	0.00
Laur dry and dry cleaning					
Medical and dental expenses					
Transportation (not including car pay	ments)			\$	200.00
Recreation, clubs and entertainment, a	newspapers, m	nagazines, etc		<u> </u>	0.00
Charitable contributions				\$	0.00
Insurance (not deducted from wages of	or included in	home mortgage paymer	nts)		
Homeowner's or renter's			· · · · · · · · · · · · · · · · · · ·	\$	0.00
Life	• • • • • • • • • • • • • • • • • • • •			\$	0.00
Auto				\$	0.00
Other				\$	0.00 0.00
Taxes (not deducted from wages or in	cluded in hor	ne mortgage navments)		Ψ <u> </u>	0.00
Taxes (not deducted from wages or in (Specify)				\$	0.00
Installment payments: (In chapter 12 :	and 13 cases,	do not list payments to	be included in the plan.)		
					0.00
Other				<u>\$</u>	0.00
Other				\$	0.00
Alimony, maintenance, and support pa					
Payments for support of additional de					
Regular expenses from operation of b	usiness profes	ssion or farm (attach de	etailed statement)	°	0.00
					200.00
Other					0.00
TOTAL MONTHLY EXPENSES (Re					2,040.00
12 1 121 121 211 211 21 222 (110)	F 2.50 011 0		* * * * * * * * * * * * * * * * * * * *		-,
[FOR CHAPTER 12 AND 13 DEBTOR	RSONLYI				
Provice the information requested below		vhether plan payments a	re to be made bi-weekly mor	ithly a	nnually, or at som
other regular interval.	,	pran pajmento a	to or made of weekly, mor	runy, a	imaging, or at som
A. Total projected monthly income			¢.	2,190.0	20

(interval)

2,040.00

150.00

150.00

B. Tc tal projected monthly expenses \$_____

C. Excess income (A minus B) \$

D. Total amount to be paid into plan each ____Monthly

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United States Bankruptcy Court Northern District of Illinois

	Dwain O. Burney			
In re	Tamika M. Anderson		Case No.	
		Debtor(s)	Chapter	13
			•	

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 25 sheets [total shown on summary page plus 1], and that they are true and correct to the best of my knowledge, information, and belief.

Date 10-12-04 Signature Dwain O. Durney
Debtor

Date W-12-04 Signature Signature Signature Tamika M. Anderson

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Joint Debtor

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Form 7 (9/00)

United States Bankruptcy Court Northern District of Illinois

In re	Dwain O. Burney Tamika M. Anderson		Case No.	
		Debtor(s)	Chapter	13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs.

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any cuestion, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation: a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives: corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE (if more than one)
\$24,000.00 H & W - Employment income - estimated 2002
\$25,000.00 H & W - Employment income - estimated 2003
\$21,900.00 H & W - Employment income - 2004 year-to-date

2. Income other than from employment or operation of business

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

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3. Payments to creditors

Nor e

a. List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor, made within 90 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

Non:

b. List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND

RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT

AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

Asset Acceptance vs. Debtor 03M1139228

Judgement

Cook County

pendin

County of Lake

pending

Family Care Center vs. Debtor Judgement

45H040301PL0559

b. Describe all property that has been attached, garnished or soized under any legal or equitable process within one year immediately None

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE

BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF

PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

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None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

Nore

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Macey Chern & Diab 444 N. Wells, Ste. 301 Chicago, IL 60610 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 2004 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$2,700 total in attorney fees.
\$500 paid pre-filing, the rest in the plan.

10. Other transfers

Non :

List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

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11. Closed financial accounts

Nor e

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> TYPE AND NUMBER OF ACCOUNT AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

NAME AND ADDRESS OF INSTITUTION

12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the

commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF **PROPERTY**

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within the two years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho. Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the six-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

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17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to. statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT

NOTICE.

LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous None

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT

NOTICE

LAW

SITE NAME AND ADDRESS

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None:

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership. sole proprietorship, or was a self-employed professional within the six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

TAXPAYER

BEGINNING AND ENDING

NAME

ADDRESS I.D. NUMBER

NATURE OF BUSINESS

DATES

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

ADDRESS

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DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

Date 10-12-04

Date 10-12-04

Signature Debtor

Signature Debtor

Signature Debtor

Signature Debtor

Signature Debtor

Signature Debtor

Signature Debtor

Signature Debtor

Signature Debtor

Signature Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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United States Bankruptcy Court
Northern District of Illinois

In	re	Dwain O. Bui Tamika M. Ai		on		Case No.	
					Debtor(s)	Chapter	13
		DI	SCL	OSURE OF COM	PENSATION OF ATT	ORNEY FOR DI	EBTOR(S)
1.	COL	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and tha compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
	For legal services. I have agreed to accept			have agreed to accept		\$	2,700.00
	Prior to the filing of this statement I have received				ived	\$	500.00
	Balance Due					\$	2,200.00
2.	The source of the compensation paid to me was:						
		Debtor		Other (specify):			
3.	The source of compensation to be paid to me is:						
		■ Debtor		Other (specify):			
4.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm						
	[1] I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.						
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed.						
6.	Ву	By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods, relief from stay actions or any othe adversary proceeding.					
			•		CERTIFICATION		
this Date	bar k	ertify that the for cruptcy proceedi	regoing ng. 4	g is a complete statement	of any agreement or arrangement	it for payment to me for	representation of the debtor(s) in
					Andrew W. Part Macey Chern & 444 N. Wells, S Chicago, IL 606 (312) 467-0004	Diab te. 301	Venus W. Thompson 6279923

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS NOTICE TO CONSUMER DEBTOR OF AVAILABLE CHAPTERS

The purpose of this notice is to acquaint you with the four chapters of the federal Bankruptcy Code under which you may file a bankruptcy petition. The bankruptcy law is complicated and not easily described. Therefore, you should seek the advice of an attorney to learn of your rights and responsibilities under the law should you decide to file a petition with the court. Court employees are prohibited from giving you legal advice.

Chapter 7: Liquidation (\$155 filing fee plus \$39 administrative fee plus \$15 trustee surcharge)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts.
- 2. Under chapter 7 a trustee takes possession of all your property. You may claim certain of your property as exempt under govern ng law. The trustee then liquidates the property and uses the proceeds to pay your creditors according to priorities of the Bankruptcy Code.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, your discharge may be denied by the court, and the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a discharge, there are some debts that are not discharged under the law. Therefore, you may still be responsible for such debts as certain taxes and student loans, alimony and support payments, criminal restitution, and debts for death or personal injury caused by driving while intoxicated from alcohol or drugs.
- 5. Under certain circumstances you may keep property that you have purchased subject to valid security interest. Your attorney can explain the options that are available to you.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$155 filing fee plus \$39 administrative fee)

- 1. Chapter 13 is designed for individuals with regular income who are temporarily unable to pay their debts but would like to pay them in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13 you must file a plan with the court to repay your creditors all or part of the money that you owe them, using your future earnings. Usually, the period allowed by the court to repay your debts is three years, but no more than five years. Your plan must be approved by the court before it can take effect.
- 3. Under chapter 13, unlike chapter 7, you may keep all your property, both exempt and non-exempt, as long as you continue to make payments under the plan.
- 4. After completion of payments under your plan, your debts are discharged except alimony and support payments, student loans, certain debts including criminal fines and restitution and debts for death or personal injury caused by driving while intoxicated from alcohol or drugs, and long term secured obligations.

Chapter 11: Reorganization (\$800 filing fee plus \$39 administrative fee)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a Chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer (\$200 filing fee plus \$39 administrative fee)

Chapter 12 is designed to permit family farmers to repay their debts over a period of time from future earnings and is in many ways similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm.

I, the debtor, affirm that I have read this notice.

Debtor's Signature Joint Debtor's Signature Date Case Number